FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED -

2814 JUN 19 AH 11: 15

FORM 1				FEC MAIL CENTER Office Use Only		
NAME OF COMMITTEE (in	n full)		Example:If typing, type over the lines.	12FE4M5		
Viking Lea	adership	PAC		1 1 1 1		
ADDRESS (number a	nd street)	BOX 4616				
(Check if an is changed)		Paul		MN,	55101	
		CITY	,	STATE	ZIP CODE	
COMMITTEE'S E-MA	AIL ADDRESS (Plea	se provide only one e-mail	address)			
(Check if is change	info@vikingleadershippac.com					
COMMITTEE'S WEB	PAGE ADDRESS	(URL)				
(Check if is change						
2. DATE 06	31'17''' 2	2014				
3. FEC IDENTIFIC	CATION NUMBER	C				
4. IS THIS STATE	MENT NE	W (N) OR	AMENDED (A)			
I certify that I have o	examined this State	ment and to the best of n	ny knowledge and belief it	is true, correct a	and complete.	
Type or Print Name	of Treasurer M	ichael Weid	ner		***************************************	
Signature of Treasure	er My	/ hunh		Date 06	17 2014	
NOTE: Submission of			subject the person signing the		the penalties of 2 U.S.C. §437g.	
Office Use			For further information co Federal Election Commissio Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)	